FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K85585

(3)

PRESTON SERVICES CORPORATION

FILED May 07 1997 8:00am Secretary of State

Principal Place of Business Mailing Address					
Principal Pla	Ce of Busiless	Mailing Address			
BIS CYPRESS VILLAGE BLVD BTE A RUSKIN FL 33573 US		815 CYPRESS VILLAGE BLVD Suite A Ruskin Fl 33573-6744 Us		·	
					Date of Last Report 05/01/1996
2. Principal Place of Business 21		2a. Mailing Address 26		4. FEI Number	Applied For
				59-2951656	59-2951656 Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zıp 29	Country 30	8. This corporation has liability for intangent of the Florida Statutes 8. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent of the Florida Statutes 9. This corporation has liability for intangent 9. This corporation has liability for inta	gible tax under s. 199.032, s
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
LANE, WILLIAM R. 501 E KENNEDY BLVD #1400 TAMPA FL 33602			Ll	82 Street Address (P.O. Box Number is Not Acceptable) 3805 Cardenal Avenue	

Ruskin,

particle | Jack office or registered agent, or both, in the State of Florida. Such change agent. I am familiar with, and accept the obligations of, Section 607.0505 Allen Preston, President SIGNATURE Signature, typod or printed name of registered agent and title if applicable required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ___ Addition Change PD DELETE 1.1 TITLE TITLE PRESTON, ALLEN 1.2 NAME NAME 3805 CARDENAL AVE STREET ADDRESS 1.3 STREET ADDRESS RUSKIN FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TOTLE AGAN, PATRICIA NAME 2.2 NAME **5008 TERR VILLAGE LN** 2.3 STREET ADDRESS STREET ADDRESS TAMPA FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE DS TITLE PRESTON, ROSINA 3.2 NAME NAME 3805 CARDENAL AVE 3.3 STREET ADDRESS STREET ADDRESS Ruskin fl 3.4, CITY-ST-ZIP CITY-ST-ZIP Addition Change TITLE DELETE 4.1 TITLE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CHY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - 2IP ☐ Change Addition □ DELETE 61 TITLE TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that pay signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

4-1107